

OFFICE OF INSURANCE AND SAFETY FIRE COMMISSIONER

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DIRECTIVE 20-EX-3

TO:

ALL INSURERS AUTHORIZED TO WRITE ACCIDENT AND HEALTH

INSURANCE AND HEALTH BENEFIT PLANS IN THE STATE OF GEORGIA

FROM:

JOHN F. KING

INSURANCE AND SAFETY FIRE COMMISSIONER

DATE:

MARCH 9, 2020

RE:

PREPAREDNESS FOR CORONAVIRUS (COVID-19)

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China. There are thousands of confirmed cases in China, and additional cases have been identified in the United States, including in Georgia.

The Department is issuing this Directive to assist individuals and entities in providing the necessary insurance-related services during this urgent public health challenge.

The Department is asking health insurers who provide coverage to Georgia residents to take the following immediate measures related to the potential impact of COVID-19:

- 1. **Barriers of Cost-Sharing**. Individuals enrolled in health insurance coverage with a high deductible may be hesitant to seek testing or treatment because of the anticipated cost. The Department invites health insurers to consider options to reduce potential barriers of cost-sharing for testing and treatment of COVID-19 during the outbreak.
- 2. **Preparedness.** Health insurers should review internal processes and procedures to ensure that they are prepared to address COVID-19 cases in Georgia, to ensure they can provide insureds with information and timely access to all medically necessary covered health care services. As the COVID-19 situation continues to develop, insurers should continue to assess their readiness and make any necessary adjustments.
- 3. **Information Access.** Access to accurate information and avoiding misinformation are critical. Health insurers should inform insureds of available benefits, respond to insured inquiries promptly, and consider measures that will streamline responses and benefits for

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- insureds. Insurers should make all necessary and useful information related to the COVID-19 outbreak available on their websites and staff their nurse-help lines accordingly.
- 4. Testing for COVID-19. It is essential to remove barriers to testing for COVID-19. The Department asks health insurers to waive any cost-sharing for COVID-19 laboratory tests so that cost-sharing does not serve as a barrier to access to this important testing. Laboratory tests are an essential health benefit, and as such, must be covered under individual and small group comprehensive health insurance policies and contracts. Moreover, insurers are asked to waive cost-sharing for an in-network provider office visit and an in-network urgent care center visit when testing for COVID-19, as well as for an emergency room visit when testing for COVID-19.
- 5. Telemedicine. Given that COVID-19 is a communicable disease, some insureds may be using telehealth services instead of in-person services. Health insurers should review O.C.G.A. § 33-24-56.4 covering payment for telemedicine. Health insurers should ensure their telehealth programs with participating providers will be able to meet any increased demand resulting from the COVID-19 outbreak.
- 6. Network Adequacy and Access to Out-of-Network Services. Insurers should verify their provider networks are adequate to handle any potential increase in the need for health care services should more COVID-19 cases be diagnosed in Georgia. If an insurer does not have a health care provider in its network with the appropriate training and experience to meet the health care needs of an insured, health insurers should make exceptions to provide access to an out-of-network provider at the in-network cost-sharing rate.
- 7. Utilization Review. Timely decision making is essential to responding appropriately to COVID-19. Health insurers should be mindful that utilization review decisions must comport with the timeframes required by Ga. Comp. R. & Regs. R. 120-2-58-.05. Moreover, insurers should not use preauthorization requirements as a barrier to access necessary treatment for COVID-19. They should be prepared to expedite utilization review and appeal processes for services related to COVID-19, when medically appropriate.
- 8. Immunizations. There is currently no vaccine to protect against COVID-19. In the event a vaccine becomes available for COVID-19, the Department requests that insurers immediately cover the immunization with no cost-sharing for all covered members.
- 9. Access to Prescription Drugs. The Department requests that insurers make expedited formulary exceptions if an insured is suffering from a health condition that may seriously jeopardize the insured's health, life, or ability to regain maximum function or if the insured is undergoing a current course of treatment using a non-formulary prescription drug. Moreover, the Department encourages issuers to consider allowing enrollees the temporary use of out-of-network pharmacies at the in-network benefit level of coverage in the event a shortage of medications occurs at network pharmacies.
- 10. **Information Sharing.** To ensure that public health officials and the public are adequately informed about what the health insurance industry is doing in response to COVID-19, the

Department asks that health insurers provide information on the steps they are taking in response to this Directive.

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